

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AT		3-21-00
O.I.P.E. CLASSIFIER		10	3-27-00
FORMALITY REVIEW	-M	60362	5-9-00
RESPONSE FORMALITY REVIEW	u	11	7/20/00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted 0 ..... Objected

Claim	Date
Final	
Original	
1	1-1
2	1-1
3	1-1
4	1-1
5	1-1
6	1-1
7	1-1
8	1-1
9	1-1
10	1-1
11	1-1
12	1-1
13	1-1
14	1-1
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	1
40	0
41	1
42	1
43	
44	
45	
46	
47	
48	1
49	0
50	1

Claim	Date
Final	
Original	
51	1-1
52	1-1
53	0
54	
55	0
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	0
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	0
84	
85	
86	
87	
88	
89	1
90	1
91	0
92	1
93	
94	
95	
96	
97	1
98	
99	
100	

Claim	Date
Final	
Original	
101	1-1
102	1-1
103	1-1
104	1-1
105	1-1
106	1-1
107	1-1
108	1-1
109	1-1
110	1-1
111	1-1
112	1-1
113	1-1
114	1-1
115	1-1
116	1-1
117	1-1
118	1-1
119	1-1
120	1-1
121	1-1
122	1-1
123	1-1
124	1-1
125	1-1
126	1-1
127	1-1
128	1-1
129	1-1
130	1-1
131	1-1
132	1-1
133	1-1
134	1-1
135	1-1
136	1-1
137	1-1
138	1-1
139	1-1
140	1-1
141	1-1
142	1-1
143	1-1
144	
145	
146	
147	
148	
149	
150	

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

Best Available Copy